



# REMOTE REPORTING: QUESTIONS & ANSWERS

Fact Sheet #5

July 2004

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**1. What kind of system does my hospital need in order to do remote reporting?**

A hospital must have the following:

- All sections of the emergency department chart must be electronic, including demographic information, physicians'/nurses' notes and/or dictation, diagnoses, toxicology results, and patient disposition.
- A method of accessing the information from outside the hospital—e.g., if physicians/nurses can access the charts from home then remote reporting is possible.
- A method of tracking access to the charts. This will serve as an audit trail for the hospital to track DAWN's review of the charts.
- A method of restricting our access to only the emergency department charts.

**2. What is involved with getting remote reporting started at my hospital?**

This depends on your system and what we would need to do in order to be compatible with it. For example, for some hospital systems, we need a modem to connect to their server, for some all we need is secure internet access. Depending on the system, we can make the set up specific to your needs.

**3. How long will it take to get started?**

This also depends on what resources we need to get started. If we can communicate the specifics of the systems in a timely manner, we can get reporting started as soon as everything is in place.

**4. Who does the reporting?**

The reporting will be done by one or two Westat employees who are located at the home office in Rockville, MD. They will be seated in a confidential office and, along with the Field Director, will be the only people with knowledge of the system and access to your ED charts. We will send in a high level manager to learn your system and they will train the reporters.

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**5. How often will they access the records?**

The reporter will access the records as often as needed to keep the data collection current within 30 days. For some hospitals, the reporter will have to access the charts every day, for some, only once or twice a week. This depends on the volume of ED visits you have and how much is involved in reporting remotely, for example, how many screens does the reporter have to review for each chart?

**6. What confidentiality protections are placed on my data with remote reporting?**

Your data are always kept confidential. When your charts are accessed by the reporter at our home office, no direct patient identifiers are collected. The information is protected by two federal laws that restrict Westat and SAMHSA's uses of the data. All DAWN personnel sign confidentiality agreements and face strict fines and jail sentences for violations of these agreements. Your data are only used for public health surveillance purposes and they are kept extremely secure. They are only published in aggregate, de-identified form.

**7. Will my hospital still receive the \$1000 access payment if we choose remote reporting?**

Yes, your hospital will still receive the annual access payment per emergency department if you choose remote reporting.

**8. Can we change our minds and choose a different reporting option even after we have chosen remote reporting?**

Yes, you can always change your reporting option. We ask written notice of intent to change reporting options so we can make the corrections to our internal systems.